



MISSOURI DEPARTMENT OF REVENUE
**ESTIMATED TAX DECLARATION
FOR INDIVIDUALS**

2009
FORM
MO-1040ES

YOUR NAME (LAST, FIRST, INITIAL)

SPOUSE'S NAME (LAST, FIRST, INITIAL)

IN CARE OF NAME

ADDRESS (NUMBER AND STREET)

CITY, STATE, ZIP CODE

RETURN THIS FORM WITH CHECK OR MONEY ORDER PAYABLE TO: **MISSOURI
DEPARTMENT OF REVENUE, P.O. BOX 555, JEFFERSON CITY, MO 65105-0555**

MO 860-1858 (11-2008)

1. Primary Social
Security Number .. *

3. Secondary Social
Security Number .. *

4. Amount of this
Installment
(U.S. funds only) .. \$

2. Primary
Name Control *

DOR USE ONLY

*

*

If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.

IF YOU WISH TO RECEIVE A PREPRINTED COUPON BOOK FOR THE REMAINDER OF 2009, PLEASE CHECK THIS BOX. (IT IS NOT NECESSARY TO CHECK THIS BOX FOR A 2010 BOOK, AS IT WILL BE AUTOMATICALLY ISSUED.) *

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1st QTR

(Calendar year—due
April 15, 2009)



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2nd QTR

(Calendar year—due
June 15, 2009)



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3rd QTR

(Calendar year—due
September 15, 2009)



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4th QTR

(Calendar year—due
January 15, 2010)